

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1297926

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:			AF	PI No.	15		
Name:				ot De	escription:		
Address 1:			_		Sec Tw	p S. R East West	
Address 2:			_		Feet from	North / South Line of Section	
City:	State:	Zip:+	_		Feet from	East / West Line of Section	
Contact Person:			Fo	otage	es Calculated from Neares	st Outside Section Corner:	
Phone: ()					NE NW	SE SW	
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	c C	nunty:			
Water Supply Well	Other:	SWD Permit #:		-		Well #:	
ENHR Permit #:	Gas Sto	rage Permit #:				vveii #	
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	1			ved on:(Date)	
Producing Formation(s): List A	─ \ll (If needed attach another	sheet)				(KCC District Agent's Name)	
Depth to	Top: Botto	m: T.D	1				
Depth to	Top: Botto	m: T.D		•			
Depth to	Top: Botto	m:T.D	1	ugging	g Completed:		
Show depth and thickness of	all water, oil and gas forma	ations.					
Oil, Gas or Water	Records		Casing Reco	ord (Su	urface, Conductor & Produc	tion)	
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
cement or other plugs were us	sed, state the character of	same depth placed from (bot	tom), to (top)	for ea	ach plug set.		
Plugging Contractor License #	#:		Name:				
Address 1:			Address 2: _				
City:			St	ate:		Zip:+	
Phone: ()							
Name of Party Responsible fo	or Plugging Fees:						
State of	County, _		, ;	SS.			
	(Print Name)		[E	Employee of Operator or	Operator on above-described well,	

Submitted Electronically

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and



TICKET NU	MBER5	0005	
LOCATION	OHawa	14S	
FOREMAN	Fred Ma	2 der	

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

SEC 401 SETO OF SOCIAL SETO									
DATE	CUSTOMER#	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY	
3.15.16	and the second	Bogle	# 16		30	15	210	FR	
CUSTOMER	Hadron Colonia on Sir	0	The state of the s	17	CHARLY AND D	million based some	On all survince		
	AB Pro	duction			TRUCK#	DRIVER	TRUCK#	DRIVER	
MAILING ADDRE	SS	nethin one		The same of	7/2	FreMad	bowal franc	BITTANTE SUE	
46	32 Uta	h Zd			495	and the or voters		1 11 11 11 11 11 11 11 11 11 11 11 11 1	
CITY	enesser est cont	STATE	ZIP CODE	fair J	675	Paley	Translate Service	En emple	
Wellsu	1/e	145	66092	CONT.	558	Mary Investment	n le said		
JOB TYPE		HOLE SIZE	DT 5 W (7.37)	HOLE DEPTH	H CASING SIZE & WEIGHT > 7/8				
CASING DEPTH FOO' DRILL PIPE				TUBING					
SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING							. ((
DISPLACEMEN	r N/H	DISPLACEMEN	T PSI	MIX PSI	No.	RATE / BA	m	TO WELL	
REMARKS: Hold Safety meathy Establish injection rate into well.									
Bo Mix + Pump 20 sis Equent , Squeeze into well a good PSI.									
Short Sa Well:									
						the design of th	Tarthur I		
	CHARLES TO	1719 - 197		M. 7		a rabelit Lon		The state of the	
The latest			11-1-1-1					- wind and	
become the color			4			Line Committee Control of the Contro	Later B		
	71.84 2 TILLS	ON THE R							
19/18/8/16	GOT THE		131/11	ratio to	Postan Institut	1,0 m	alle .	REPORT OF THE	
331 / 16	ETTATE TRUM	TOMOTIA	THITXILLE	HW K	of Cuthing Bar		meen) Lugar	oli der den juk	

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
0 E 0 450	s (.serwierta io vinanie in d	PUMP CHARGE 495	150000	
1 E0002	AND THE RESERVE OF THE PARTY OF	MILEAGE	N/C	Parintena
EOTIL	1/2 M. Si Mora	Ton Miles Delivery 558	33000	trade mi
WE0853	1/2 4	80 BBL Vac Truck 675	5000	phable I mi
		Sub Total	188000	Jinga cam
AND TO THE		LESS 65%	· 12220	6580
		general of the well action of	112 - 1111 2 119	suching due
		THE RESERVE OF THE CONTRACT OF	and the second	di grant a
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		16W ME OS Ub Total	28030	vehatsocyen,
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		State and Locate and California	2017/0 - 01/13W	63
		all microsome elements	SALES TAX	7 83
avin 3737	m	on the second se	ESTIMATED TOTAL	76370
AUTHORIZTION	Illum Alboa	le TITLE OWNER	DATE 3-1	5-16

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.